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N. CAUSSEAUX

JUL 8 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Kto Pressure Cleaning & LAWN (Name of Limited Liability Company) MA: MENANCE
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kirstin L. Powell (Name of Person)
SAME AS Above (Firm/Company)
12 Venezian wary (Address)
Wilhur By the SeA FL, 32127 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (386) 322-3921 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
☐ \$25 Filing Fee  \$355 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: KtJ f	ressure Cleaning & LAWN
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 12 Venezian WAJ Wilbur Ry the Sea
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4618 BAK HAMMOUT C+.
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of States w
Registered Agent:	Kirstin Powell =
Registered Office Address:	4618 OAK HAMMONK Ct.
	PONCE INTET FL 32127
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:
NEW Registered Agent:	Keith Boggs
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10719 BANFIELD Drive Riverview FL 33529
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.	eet address of the registered office and the business
(Signature of a member or authorized representative of a member)    Compared to the compared t	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my position. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notification.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ed in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent)